

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	<i>MY</i>		10-31-00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	<i>LIT</i>	<i>200007</i> <i>60390</i>	12-30-01 <i>24-01</i>

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

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If more than 150 claims or 10 actions  
staple additional sheet here

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